B1 (Official Form 1)	(1/08)											
		United S Wes			ruptcy f Michig					Vol	luntary	Petition
Name of Debtor (if <b>De Jonge, Dor</b>		er Last, First,	Middle):			Name	of Joint De	ebtor (Spouse	) (Last, First	, Middle):		
All Other Names use (include married, ma	d by the Debtiden, and trade	or in the last 8 e names):	3 years					used by the J maiden, and			8 years	
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all)  xxx-xx-5346				IN Last f	our digits o	f Soc. Sec. or state all)	Individual-	Гахрауег I.	D. (ITIN) N	o./Complete EIN		
Street Address of Debtor (No. and Street, City, and State):  16313 Taft Rd.  Spring Lake, MI  ZIP Code					Address of	Joint Debtor	(No. and Str	reet, City, a	and State):	ZIP Code		
					49456-10	17						ZII Code
County of Residence Ottawa	or of the Prin	cipal Place of	f Business	S:			•	ence or of the	•			
Mailing Address of l	Debtor (if diffe	erent from stre	eet addres	ss):		Mailin	ng Address	of Joint Debt	or (if differe	nt from stre	eet address):	
				Г	ZIP Code							ZIP Code
Location of Principa (if different from stre	Assets of Bue et address abo	siness Debtor ove):										1
(Form o	page 2 of this udes LLC and not one of the a	ors) form. I LLP) bove entities,	Sing in I Rail Stoc	(Check Ith Care Bu gle Asset Re 1 U.S.C. § road ekbroker mmodity Bre uring Bank er  Tax-Exe (Check box tor is a tax-	eal Estate as 101 (51B)  oker  mpt Entity a, if applicable exempt org	e) anization	defined	the I er 7 er 9 er 11 er 12	of Cl of  Nature (Checl onsumer debts, 101(8) as	hapter 15 F a Foreign hapter 15 F a Foreign control of the foreign e of Debts	cone box) Petition for R Main Procee Petition for R Nonmain Pr	decognition eding decognition
	F212 I	F (Cll	Cod		of the Unite	e Code).	a perso	onal, family, or	household pur	pose."		
■ Full Filing Fee a  □ Filing Fee to be attach signed appris unable to pay a limit of the signed apprince of the	tached  aid in installn  lication for the ee except in in	e court's cons nstallments. R	ble to ind ideration tule 10066	certifying to the certifying to the certifying to the certification of the certification of the certification of the certifying to the certification of the	hat the debt cial Form 3A only). Must	Check	Debtor is  if: Debtor's a to insider all applica A plan is Acceptance	a small busin not a small be aggregate non s or affiliates)	usiness debto acontingent l are less than ith this petiti n were solici	s defined in or as define iquidated d 1 \$2,190,00 on. ted prepeti	ed in 11 U.S. lebts (exclud 00.	ing debts owed
Statistical/Administ ☐ Debtor estimates ☐ Debtor estimates there will be no f	that funds wil that, after any unds available	l be available exempt prop	erty is ex	cluded and	administrat			<u> </u>			FOR COURT	
Estimated Number o	Creditors  100- 199	200-	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000				
Estimated Assets	\$100,001 to \$500,000	\$500,001 to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,000 to \$500 million	\$500,000,001 to \$1 billion					
Estimated Liabilities	\$100,001 to \$500,000	\$500,001 to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,000 to \$500 million	\$500,000,001 to \$1 billion					

B1 (Official Fori	n 1)(1/08)		Page 2
Voluntary	<b>Petition</b>	Name of Debtor(s):  De Jonge, Don Wayne	
(This page mus	st be completed and filed in every case)		
	All Prior Bankruptcy Cases Filed Within Last	8 Years (If more than two, attach ad	ditional sheet)
Location Where Filed:	- None -	Case Number:	Date Filed:
Location Where Filed:		Case Number:	Date Filed:
Per	nding Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If more than	one, attach additional sheet)
Name of Debto	or:	Case Number:	Date Filed:
District:		Relationship:	Judge:
	Exhibit A		hibit B
forms 10K ar pursuant to S	leted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission ection 13 or 15(d) of the Securities Exchange Act of 1934 ting relief under chapter 11.)	I, the attorney for the petitioner named have informed the petitioner that [he of 12, or 13 of title 11, United States Coo	whose debts are primarily consumer debts.) I in the foregoing petition, declare that I is r she] may proceed under chapter 7, 11, le, and have explained the relief available ify that I delivered to the debtor the notice
☐ Exhibit A	A is attached and made a part of this petition.	X /s/ David Knoester	November 7, 2009
		Signature of Attorney for Debtor(s)  David Knoester P53887	
	Exh	ibit C	
l _	r own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition.	pose a threat of imminent and identifiable	harm to public health or safety?
	Exh	ibit D	
Exhibit I  If this is a join	-	a part of this petition.	separate Exhibit D.)
L Exhibit i	D also completed and signed by the joint debtor is attached a		
	Information Regardin (Check any ap	_	
•	Debtor has been domiciled or has had a residence, principal days immediately preceding the date of this petition or for	al place of business, or principal asset	s in this District for 180 any other District.
	There is a bankruptcy case concerning debtor's affiliate, ge	• .	•
	Debtor is a debtor in a foreign proceeding and has its princ this District, or has no principal place of business or assets proceeding [in a federal or state court] in this District, or the sought in this District.	in the United States but is a defendance interests of the parties will be serve	nt in an action or d in regard to the relief
	Certification by a Debtor Who Reside (Check all app		ty
	Landlord has a judgment against the debtor for possession	of debtor's residence. (If box checked,	complete the following.)
	(Name of landlord that obtained judgment)		
	(Address of landlord)		
	Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment f		
_	Debtor has included in this petition the deposit with the coafter the filing of the petition.	•	-
	Debtor certifies that he/she has served the Landlord with the	nis certification. (11 U.S.C. § 362(1)).	

11/07/09 2:02PM B1 (Official Form 1)(1/08)

### Voluntary Petition

(This page must be completed and filed in every case)

### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

### X /s/ Don Wayne De Jonge

Signature of Debtor Don Wavne De Jonge

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

November 7, 2009

Date

### Signature of Attorney\*

### X /s/ David Knoester

Signature of Attorney for Debtor(s)

#### David Knoester P53887

Printed Name of Attorney for Debtor(s)

#### David Knoester, PLC

Firm Name

6701 Lake Michigan Drive **PO BOX 637** Allendale, MI 49401-0637

Address

## Email: david@davidknoesterplc.com

616-895-7300 Fax: 616-892-3302

Telephone Number

November 7, 2009

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Name of Debtor(s):

De Jonge, Don Wayne

#### **Signatures**

#### Signature of a Foreign Representative

Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

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11/07/09 2:02PM

B 1D(Official Form 1, Exhibit D) (12/08)

# **United States Bankruptcy Court**

		Western District of Michigan		
In re	Don Wayne De Jonge		Case No.	
		Debtor(s)	Chapter	7

### EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

□ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

B 1D(Official Form 1, Exhibit D) (12/08) - Cont.
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to
financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or
through the Internet.);
☐ Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: /s/ Don Wayne De Jonge Don Wayne De Jonge
Date: November 7, 2009

B6 Summary (Official Form 6 - Summary) (12/07)

### **United States Bankruptcy Court** Western District of Michigan

In re	Don Wayne De Jonge		Case No.	
-	<del>-</del>	Debtor		
			Chapter	7

### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	153,200.00		
B - Personal Property	Yes	4	87,055.92		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	2		225,403.09	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	4		179,638.81	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			1,569.00
J - Current Expenditures of Individual Debtor(s)	Yes	1			2,400.74
Total Number of Sheets of ALL Schedu	ıles	17			
	T	otal Assets	240,255.92		
			Total Liabilities	405,041.90	

Form 6 - Statistical Summary (12/07)

### **United States Bankruptcy Court** Western District of Michigan

In re	Don Wayne De Jonge	_	Case No.		
-		Debtor ,			
			Chapter	7	
			enapter	•	

### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

#### State the following:

Average Income (from Schedule I, Line 16)	1,569.00
Average Expenses (from Schedule J, Line 18)	2,400.74
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	1,569.00

#### State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY"     column		2,404.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		179,638.81
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		182,042.81

B6A (Official Form 6A) (12/07)

In re	Don Wayne De Jonge		Case No.	
_			,	
		Debtor		

### SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Principal residence @ SEV X 2	Fee simple	-	153,200.00	152,000.00
Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim

Sub-Total > **153,200.00** (Total of this page)

Total > **153,200.00** 

(Report also on Summary of Schedules)

**0** continuation sheets attached to the Schedule of Real Property

B6B (Official Form 6B) (12/07)

In re	Don Wayne De Jonge		Case No
		Debtor	

### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	Cash \$20.00 Location: 16313 Taft Rd., Spring Lake MI	-	20.00
2.	Checking, savings or other financial	Checking - Michigan Commerce Bank	-	50.00
	accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Checking @ Michigan Commerce Bank	-	50.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	x		
4.	Household goods and furnishings, including audio, video, and computer equipment.	See attachment Location: 16313 Taft Rd., Spring Lake MI	-	7,970.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X		
6.	Wearing apparel.	x		
7.	Furs and jewelry.	x		
8.	Firearms and sports, photographic, and other hobby equipment.	x		
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	Northwestern Mutual Life Policy #NN-65LIFE-Surrender value @ \$1,531.37 - Cash value @ \$7,043.94 Location: 16313 Taft Rd., Spring Lake MI	-	7,043.94
		Northwestern Mutual Liife - Life Policy 10-003-466-Surrender Value \$5,608.19 Location: 16313 Taft Rd., Spring Lake MI	-	32,854.16

 $Sub\text{-}Total > \\ (Total of this page) \\ 47,988.10$ 

<sup>3</sup> continuation sheets attached to the Schedule of Personal Property

11/07/09 2:02PM

In re	Don Wayne De Jonge	Case No.
	•	

Debtor

### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
			Northwestern Mutual Life Policy 13-127-098 NN-Extraordinary Life -Surrender Value \$7073.72 Location: 16313 Taft Rd., Spring Lake MI	-	18,279.60
			Penn Mutual Life Ins. #006243174 Location: 16313 Taft Rd., Spring Lake MI	-	7,528.28
10.	Annuities. Itemize and name each issuer.	X			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		IRA Edward Jones - 495-11056-1-0 Location: 16313 Taft Rd., Spring Lake MI	-	4,666.17
	plans. Give particulars.		Roth IRA - Edward Jones #495-94185-1-0 Location: 16313 Taft Rd., Spring Lake MI	-	7,593.77
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.		100% Shareholder of Redi-Wood, Inc. Leases property: 1350 Kooiman Ave., Grand Haven, MI 49417	-	500.00
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.				

Sub-Total > 38,567.82 (Total of this page)

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

11/07/09 2:02PM

In re	Don Wayne De Jonge	Case No.
	•	

Debtor

### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Proper	rty	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	Х				
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X				
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X				
22.	Patents, copyrights, and other intellectual property. Give particulars.	X				
23.	Licenses, franchises, and other general intangibles. Give particulars.	X				
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X				
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	X				
26.	Boats, motors, and accessories.	X				
27.	Aircraft and accessories.	X				
28.	Office equipment, furnishings, and supplies.	X				
29.	Machinery, fixtures, equipment, and supplies used in business.		1996 Chevy Van, hi-lo, wood working saw, inventory, located at business address.		-	500.00
30.	Inventory.	X				
31.	Animals.	X				
				(Total	Sub-Tota of this page)	al > <b>500.00</b>

Sheet **2** of **3** continuation sheets attached to the Schedule of Personal Property

In re	Don Wayne De Jonge	Case No.	
		<del>,</del>	

Debtor

### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > 0.00 (Total of this page)

Total >

87,055.92

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

11/07/09 2:02PM

In re Don Wayne De Jonge Case No. \_\_\_\_\_

Debtor

### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:	☐ Check if debtor claims a homestead exemption that exceeds
(Check one box)	\$136,875.
■ 11 U.S.C. §522(b)(2)	
□ 11 U.S.C. §522(b)(3)	

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Real Property Principal residence @ SEV X 2 Location: 16313 Taft Rd., Spring Lake MI	11 U.S.C. § 522(d)(1) 11 U.S.C. § 522(d)(1)	0.00 1,200.00	153,200.00
Cash on Hand Cash \$20.00 Location: 16313 Taft Rd., Spring Lake MI	11 U.S.C. § 522(d)(5)	20.00	20.00
Checking, Savings, or Other Financial Accounts,			
Checking - Michigan Commerce Bank	11 U.S.C. § 522(d)(5)	50.00	50.00
Checking @ Michigan Commerce Bank	11 U.S.C. § 522(d)(5)	50.00	50.00
Household Goods and Furnishings See attachment Location: 16313 Taft Rd., Spring Lake MI	11 U.S.C. § 522(d)(3)	7,970.00	7,970.00
Interests in Insurance Policies Northwestern Mutual Life Policy #NN-65LIFE-Surrender value @ \$1,531.37 - Cash value @ \$7,043.94 Location: 16313 Taft Rd., Spring Lake MI	11 U.S.C. § 522(d)(8)	1,531.94	7,043.94
Northwestern Mutual Liife - Life Policy 10-003-466-Surrender Value \$5,608.19 Location: 16313 Taft Rd., Spring Lake MI	11 U.S.C. § 522(d)(8)	5,608.19	32,854.16
Northwestern Mutual Life Policy 13-127-098 NN-Extraordinary Life -Surrender Value \$7073.72 Location: 16313 Taft Rd., Spring Lake MI	11 U.S.C. § 522(d)(8) 11 U.S.C. § 522(d)(5)	2,097.96 4,975.76	18,279.60
Penn Mutual Life Ins. #006243174 Location: 16313 Taft Rd., Spring Lake MI	11 U.S.C. § 522(d)(8)	1,268.04	7,528.28
Interests in IRA, ERISA, Keogh, or Other Pension IRA Edward Jones - 495-11056-1-0 Location: 16313 Taft Rd., Spring Lake MI	or Profit Sharing Plans 11 U.S.C. § 522(d)(12)	4,666.77	4,666.17
Roth IRA - Edward Jones #495-94185-1-0 Location: 16313 Taft Rd., Spring Lake MI	11 U.S.C. § 522(d)(12)	7,593.77	7,593.77
Stock and Interests in Businesses 100% Shareholder of Redi-Wood, Inc. Leases property: 1350 Kooiman Ave., Grand Haven, MI 49417	11 U.S.C. § 522(d)(5)	500.00	500.00

Total: 37,532.43 239,755.92

B6D (Official Form 6D) (12/07)

In re	Don Wayne De Jonge		Case No.	
-		Debtor	,	

### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	J H	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	UNLIQUIDAT	SPUTE	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. Liber 5488, Page 845  Countrywide 1199 North Fairfax St Simi Valley, CA 93062-5170		-	August 7, 2007  First Mortgage  Principal residence @ SEV X 2 Location: 16313 Taft Rd., Spring Lake MI  Value \$ 153,200.00	Т	T E D		115,000.00	0.00
Account No. #xxxxx8754  Flagstar Bank 5151 Corporate Drive Troy, MI 48098		-	August 16, 2007  Mortgage  Principal residence @ SEV X 2 Location: 16313 Taft Rd., Spring Lake MI  Value \$ 153,200,00				37,000.00	0.00
Account No. xxxxxxxxxx0001  Marshall & Ilsley Bank 770 N Water St Milwaukee, WI 53202	×		Opened 4/05/08 Last Active 5/01/08  Purchase Money Security  2008 Chevy Truck VIN# 1GCEK14038E137187  Value \$ 20,775.00				23,179.00	2,404.00
Account No. xx-xx6-638  Northwestern Mutual 720 East Wisconsin Ave Milwaukee, WI 53202		-	3/14/88 Loan against Life Insurance benefits Northwestern Mutual Life Policy #NN-65LIFE-Surrender value @ \$1,531.37 - Cash value @ \$7,043.94 Location: 16313 Taft Rd., Spring Lake MI Value \$ 7,043.94				5,512.00	0.00
_1 continuation sheets attached		<u> </u>	1,010101	ubt nis		-	180,691.00	2,404.00

 $B6D\ (Official\ Form\ 6D)\ (12/07)$  - Cont.

In re	Don Wayne De Jonge	Case No.	
_			
		Debtor	

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	1	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	COZH-ZGEZ	0Z1_00_04	ISPUTE	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xx-x78-60			7/16/1986	Т	T E D	li		
Northwestern Mutual 720 East Wisconsin Ave Milwaukee, WI 53202		_	Loan against Life Insurance benefits  Northwestern Mutual Liife - Life Policy 10-003-466-Surrender Value \$5,608.19		D			
			Location: 16313 Taft Rd., Spring Lake MI	-				
			Value \$ 32,854.16				27,245.97	0.00
Account No. xx-x78-60			11/1/1994					
Northwestern Mutual			Loan against Life Insurance benefits					
720 East Wisconsin Ave Milwaukee, WI 53202		-	Northwestern Mutual Life Policy 13-127-098 NN-Extraordinary Life -Surrender Value \$7073.72 Location: 16313 Taft Rd., Spring Lake MI					
			Value \$ 18,279.60				11,205.88	0.00
Penn Mutual 600 Dresher Rd. Horsham, PA 19044		-	Penn Mutual Life Ins. #006243174 Location: 16313 Taft Rd., Spring Lake MI					
			Value \$ 7,528.28	1			6,260.24	0.00
Account No.			Value \$					
Account No.		t	value ψ					
			Value \$					
Sheet 1 of 1 continuation sheets attack		d to	)	ubt		- 1	44,712.09	0.00
Schedule of Creditors Holding Secured Claims			(Total of the			t	·	
			(Report on Summary of Sc		`ota lule	- 1	225,403.09	2,404.00

B6E (Official Form 6E) (12/07)

•			
In re	Don Wayne De Jonge	Case No	
-		, Debtor	

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

total also on the bandstear building of Certain Embridges and reduced Butt.
■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
Domestic support obligations  Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federa Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

<sup>\*</sup> Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6F (Official Form 6F) (12/07)

In re	Don Wayne De Jonge	Case No	
		Debtor ,	

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

		_	r			_		
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H		N G	Z Q	DISPUTED		AMOUNT OF CLAIM
Account No. xxxxxxxxxxxx5274			Opened 5/09/06 Line of Credit	N T	.DATED		ľ	
Advanta Bank Corp Po Box 844 Spring House, PA 19477	х	-						28,695.00
Account No. xxxx-xxxx-xxxx-3015			7/6/09	T	Н	l	†	
Bank Of America Department 5996 PO Box 1259 Oaks, PA 19456		-	Charge Account					18,601.63
Account No. xxxx xxxx xxxx 0896  Chase Card Services PO Box 94014 Palatine, IL 60094-4014		-	5/30/2009 Charge Account					
					Ц	L	1	20,136.77
Account No. xxxx xxxx xxxx 2072  FIA Card Services PO Box 15019  Wilmington, DE 19886-5019		-	7/30/09 Charge Account					9,309.41
continuation sheets attached			(Total of t	Subt			,	76,742.81

 $B6F\ (Official\ Form\ 6F)\ (12/07)$  - Cont.

In re	Don Wayne De Jonge		Case No.	
•		Debtor	,	

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME,	CO		sband, Wife, Joint, or Community	CONT	U N	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M		NT I NG E N	LIQUIDATED	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxxx xxxx xxxx 1827			4/30/09	Т	T E		
FIA Card Services PO Box 15726 Wilmington, DE 19886-5726		-	Charge Account		D		20,000.00
Account No. xxxxxxxxxxx2348			Opened 5/23/07 Last Active 4/21/09				
Fifth Third Bank 5050 Kingsley Dr Cincinnati, OH 45227		-	ChargeAccount				18,363.00
Account No. xxxxxxxxxxxx8164			Opened 8/24/07 Last Active 10/01/08				
Fifth Third Bank 5050 Kingsley Dr Cincinnati, OH 45227		-	ChargeAccount				16,495.00
Account No. xxxxx6273			Opened 10/01/07				
Fth3rd Bk P.O. Box 2306 Cincinnati, OH 45201-2306		-	Charge Account				2,443.00
Account No. #xxxxx9882			5-12-09		T		
Grand Haven Pathology PC 5620 Southlake Blvd Toledo, OH 43614-1502		_	Medical services				565.00
Sheet no. <u>1</u> of <u>3</u> sheets attached to Schedule of				Sub			57,866.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	37,000.00

 $B6F\ (Official\ Form\ 6F)\ (12/07)$  - Cont.

In re	Don Wayne De Jonge		Case No.	
•		Debtor	,	

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME,	C	Ηι	usband, Wife, Joint, or Community	C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M		CONFINGEN	טו	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxxx xxxx xxxx 6918			6/17/09	Т	A T E D		
National City PO Box 856176 Louisville, KY 40285-6176	х	-	Charge Account		D		8,437.00
Account No. xxxx xxxx xxxx 2034			8/7/09				
National City PO Box 4068 Kalamazoo, MI 49003	x	-	Guarantee of business or trade debt				35,000.00
							33,000.00
Account No. Hxxxxxxx1105  North Ottawa Community Hosp 1309 Sheldon Rd Grand Haven, MI 49417		-	8-27-09 Medical services				95.00
Account No. # xx4510			5-19-09				
West Coast Anesthesia PC PO Box 0630 Muskegon, MI 49443		-	Medical services				255.00
Account No. #6469			4-29-09				
West Coast Urology PLC 1301 Mercy Dr. Muskegon, MI 49444-1837		-	Medical services				348.00
Sheet no. 2 of 3 sheets attached to Schedule of				Sub			44,135.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	44,133.00

B6F (Official Form 6F) (12/07) - Cont.

In re	Don Wayne De Jonge	Case No.	Case No.
_		Debtor	

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

Husband, Wife, Joint, or Community UNLLQULDATED CODEBTOR CONTINGENT CREDITOR'S NAME, **MAILING ADDRESS** Н DATE CLAIM WAS INCURRED AND INCLUDING ZIP CODE. w CONSIDERATION FOR CLAIM. IF CLAIM AND ACCOUNT NUMBER J AMOUNT OF CLAIM IS SUBJECT TO SETOFF, SO STATE. С (See instructions above.) Account No. #x9274 5-30-09 **Medical services** West MI Gastroenterology 1675 Leahy St. Ste 324 Muskegon, MI 49442 805.00 Account No. #Hxx0080 8-31-09 **Medical services West Shore Diagnostics PC** 1774 Peck St. Muskegon, MI 49441 90.00 Account No. Account No. Account No. Sheet no. 3 of 3 sheets attached to Schedule of Subtotal 895.00 Creditors Holding Unsecured Nonpriority Claims (Total of this page) Total 179,638.81

(Report on Summary of Schedules)

Case:09-13206-jdg Doc #:1 Filed: 11/07/09 Page 21 of 48

B6G (Official Form 6G) (12/07)

In re	Don Wayne De Jonge		Case No.	
_		Debtor		

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

B6H (Official Form 6H) (12/07)

In re	Don Wayne De Jonge	Case No.	
-		Debtor	

### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

#### NAME AND ADDRESS OF CODEBTOR

Redi-Wood 1350 Kooiman Ave. Grand Haven, MI 49417-2523

Redi-Wood 1350 Kooinan Ave Grand Haven, MI 49417

Redi-Wood 1350 Kooiman Ave Grand Haven, MI 49417-2523

Redi-Wood, Inc. 1350 Kooiman Ave. Grand Haven, MI 49417

#### NAME AND ADDRESS OF CREDITOR

Advanta Bank Corp Po Box 844 Spring House, PA 19477

National City PO Box 856176 Louisville, KY 40285-6176

National City PO Box 4068 Kalamazoo, MI 49003

Marshall & Ilsley Bank 770 N Water St Milwaukee, WI 53202

B6I (Official Form 6I) (12/07)

In re	Don Wayne De Jonge		Case No.	
		Debtor(s)		

### SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:	DEPENDENTS OF DE	EBTOR AND SPOUSE	
Single	RELATIONSHIP(S): None.	AGE(S):	
<b>Employment:</b>	DEBTOR	SPOUSE	
Occupation			
Name of Employer	Unemployed		
How long employed			
Address of Employer			
INCOME: (Estimate of average	or projected monthly income at time case filed)	DEBTOR	SPOUSE
	and commissions (Prorate if not paid monthly)	\$ 0.00	\$ <b>N/A</b>
2. Estimate monthly overtime		\$ 0.00	\$ <b>N/A</b>
3. SUBTOTAL		\$0.00_	\$ <b>N/A</b>
4. LESS PAYROLL DEDUCTION	ONS		
<ul> <li>a. Payroll taxes and social</li> </ul>	security	\$ <b>0.00</b>	\$ <b>N/A</b>
b. Insurance		\$ <u> </u>	\$ <b>N/A</b>
c. Union dues		\$ 0.00	\$ <b>N/A</b>
d. Other (Specify):		\$ 0.00	\$ <b>N/A</b>
_		\$\$	\$ <u>N/A</u>
5. SUBTOTAL OF PAYROLL	DEDUCTIONS	\$	\$ <b>N/A</b>
6. TOTAL NET MONTHLY TA	AKE HOME PAY	\$	\$ <b>N/A</b>
7. Regular income from operation	on of business or profession or farm (Attach detailed statement	t) \$ <b>0.00</b>	\$ <b>N/A</b>
8. Income from real property	•	\$ 0.00	\$ <b>N/A</b>
9. Interest and dividends		\$ <u> </u>	\$ <b>N/A</b>
dependents listed above	pport payments payable to the debtor for the debtor's use or the	at of \$	\$ <b>N/A</b>
11. Social security or government (Specify): <b>Unemploy</b>	and a suit	\$ 1,569.00	\$ <b>N/A</b>
(Specify).	ment	\$ 0.00	\$ N/A
12. Pension or retirement incom	e	\$ 0.00	\$ N/A
13. Other monthly income			' <del></del>
(Specify):		\$0.00	\$ <b>N/A</b>
		\$	\$ <b>N/A</b>
14. SUBTOTAL OF LINES 7 T	HROUGH 13	\$1,569.00	\$ <b>N/A</b>
15. AVERAGE MONTHLY IN	COME (Add amounts shown on lines 6 and 14)	\$1,569.00	\$ <b>N/A</b>
16. COMBINED AVERAGE M	ONTHLY INCOME: (Combine column totals from line 15)	\$	1,569.00

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

B6J (Official Form 6J) (12/07)

11/07/09	2.U2PM

In re	Don Wayne De Jonge		Case No.	
		Debtor(s)		

### SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case

filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22		ge monthly
☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Comple expenditures labeled "Spouse."	ete a separat	e schedule of
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	1,379.77
a. Are real estate taxes included? Yes X No No		
b. Is property insurance included? Yes X No		
2. Utilities: a. Electricity and heating fuel	\$	300.00
b. Water and sewer	\$	45.00
c. Telephone	\$	0.00
d. Other cable, internet	\$	165.97
3. Home maintenance (repairs and upkeep)	\$	25.00
4. Food	\$	200.00
5. Clothing	\$	0.00
6. Laundry and dry cleaning	\$	0.00
7. Medical and dental expenses	\$	0.00
8. Transportation (not including car payments)	\$	250.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	0.00
10. Charitable contributions	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	0.00
b. Life	\$	15.00
c. Health	\$	0.00
d. Auto	\$	0.00
e. Other	\$	0.00
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify)	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	0.00
b. Other	\$	0.00
c. Other	\$	0.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other personal grooming	\$	20.00
Other	\$	0.00
10 AVED ACE MONTHI V EVDENGEG /T / 11' - 1 17 D - / 1 C CC 1 - 1 1 1	Φ.	2 400 74
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	2,400.74
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:	_	
20. STATEMENT OF MONTHLY NET INCOME		
a. Average monthly income from Line 15 of Schedule I	\$	1,569.00
b. Average monthly expenses from Line 18 above	\$	2,400.74
c. Monthly net income (a. minus b.)	\$	-831.74

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B6 Declaration (Official Form 6 - Declaration). (12/07)

### **United States Bankruptcy Court** Western District of Michigan

In re	Don wayne De Jonge			Case No.	
			Debtor(s)	Chapter	7
	DECLARATION O				
	I declare under penalty of perjury the sheets, and that they are true and con				
Date	November 7, 2009	Signature	/s/ Don Wayne De Jonge Don Wayne De Jonge Debtor	ge	

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

B7 (Official Form 7) (12/07)

		United States Bankruptcy Co Western District of Michigan		
In re	Don Wayne De Jonge	S	Case No.	
	,	Debtor(s)	Chapter 7	
		STATEMENT OF FINANCIAL AI	FFAIRS	
not a joir proprieto activities name and	uses is combined. If the case is file at petition is filed, unless the spous or, partner, family farmer, or self-er as well as the individual's persona	by every debtor. Spouses filing a joint petition may d under chapter 12 or chapter 13, a married debtor es are separated and a joint petition is not filed. An imployed professional, should provide the informatic l affairs. To indicate payments, transfers and the li liardian, such as "A.B., a minor child, by John Doe,	must furnish information for individual debtor engaged i on requested on this stateme ke to minor children, state the	r both spouses whether or in business as a sole nt concerning all such ne child's initials and the
	s 19 - 25. If the answer to an app	ted by all debtors. Debtors that are or have been in licable question is "None," mark the box labeled neet properly identified with the case name, case nu	"None." If additional space	e is needed for the answer
		DEFINITIONS		
he follow other that or the po	' for the purpose of this form if the wing: an officer, director, managing n a limited partner, of a partnership	iness" for the purpose of this form if the debtor is a debtor is or has been, within six years immediately g executive, or owner of 5 percent or more of the vor; a sole proprietor or self-employed full-time or pagages in a trade, business, or other activity, other the	preceding the filing of this oting or equity securities of a rt-time. An individual debto	bankruptcy case, any of a corporation; a partner, or also may be "in business
	ons of which the debtor is an office curities of a corporate debtor and t	udes but is not limited to: relatives of the debtor; geer, director, or person in control; officers, directors, heir relatives; affiliates of the debtor and insiders of	, and any owner of 5 percent	t or more of the voting or
	1. Income from employment o	r operation of business		
None	business, including part-time ac year to the date this case was co calendar year. (A debtor that ma report fiscal year income. Identi- each spouse separately. (Marrie	ne the debtor has received from employment, trade, etivities either as an employee or in independent transmenced. State also the gross amounts received dualitains, or has maintained, financial records on the fify the beginning and ending dates of the debtor's fid debtors filing under chapter 12 or chapter 13 must see are separated and a joint petition is not filed.)	de or business, from the beg uring the <b>two years</b> immedia basis of a fiscal rather than scal year.) If a joint petition	ginning of this calendar ately preceding this a calendar year may is filed, state income for
	AMOUNT <b>\$30,505.00</b>	SOURCE 2008 Income from employment by R	ediwood, Inc.= \$30,505.	0
	\$64,564.00	2007 Income from employment by R	ediwood	
	2. Income other than from em	ployment or operation of business		
None	during the <b>two years</b> immediate each spouse separately. (Marrie	eived by the debtor other than from employment, trely preceding the commencement of this case. Give d debtors filing under chapter 12 or chapter 13 muses are separated and a joint petition is not filed.)	particulars. If a joint petitio	on is filed, state income for

AMOUNT

\$13,898.61 YTD 2009 - Unemployment compensation

### 3. Payments to creditors

### None

#### Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL OF CREDITOR PAYMENTS AMOUNT PAID OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAID OR
PAYMENTS/ VALUE OF AMOUNT STILL
NAME AND ADDRESS OF CREDITOR TRANSFERS TRANSFERS OWING

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND

AMOUNT STILL

RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT

OWING

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT

AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR AGENCY

AND LOCATION

DISPOSITION

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE

BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE

ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

e b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND LOCATION

NAME AND ADDRESS OF CUSTODIAN OF COURT
CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT VALUE

DESCRIPTION AND

VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE David Knoester, PLC 6701 Lake Michigan Drive PO BOX 637 Allendale, MI 49401-0637 DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR August 1, 2009, Debtor AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

\$1500.00

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled

trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S)

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

TYPE OF ACCOUNT, LAST FOUR

DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE AMOUNT AND DATE OF SALE OR CLOSING

4

### NAME AND ADDRESS OF INSTITUTION

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

### 15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

■ Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

SITE NAME AND ADDRESS

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

#### 18. Nature, location and name of business

None

NAME

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND NATURE OF BUSINESS ENDING DATES

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or

owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None a. List

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS Richard Cinningham 3036 Sheffield St. Muskegon, MI 49441 DATES SERVICES RENDERED

10 years

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory,

and the dollar amount and basis of each inventory.

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

DATE OF INVENTORY INVENTORY SUPERVISOR

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

b. List the name and address of the person having possession of the fectius of each of the two inventories reported in a., above

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY
DATE OF INVENTORY
RECORDS

21 . Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS NATURE OF INTEREST PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NATURE AND PERCENTAGE
NAME AND ADDRESS TITLE OF STOCK OWNERSHIP

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7

#### 22 . Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

### 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

#### 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

#### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date November 7, 2009 Signature /s/ Don Wayne De Jonge
Don Wayne De Jonge

Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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Best Case Bankruptcy

B8 (Form 8) (12/08)

### United States Bankruptcy Court Western District of Michigan

In re	Don Wayne De Jonge			
		Debtor(s)	Chapter	7

### CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

**PART A -** Debts secured by property of the estate. (Part A must be fully completed for **EACH** debt which is secured by property of the estate. Attach additional pages if necessary.)

	• /
Property No. 1	
Creditor's Name: Countrywide	Describe Property Securing Debt: Principal residence @ SEV X 2 Location: 16313 Taft Rd., Spring Lake MI
Property will be (check one):	
☐ Surrendered ■ Retained	
If retaining the property, I intend to (check at least one):  ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain retain and pay according to original metals.  Property is (check one):	ortgage (for example, avoid lien using 11 U.S.C. § 522(f)).
Claimed as Exempt	☐ Not claimed as exempt
Camines as Enempt	= 1 tot ommed as onempt
Property No. 2	
Creditor's Name: Flagstar Bank	Describe Property Securing Debt: Principal residence @ SEV X 2 Location: 16313 Taft Rd., Spring Lake MI
Property will be (check one):	
☐ Surrendered ■ Retained	
If retaining the property, I intend to (check at least one):  ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain <u>retain and pay according to original loads</u>	an (for example, avoid lien using 11 U.S.C. § 522(f)).
Property is (check one):	
■ Claimed as Exempt	□ Not claimed as exempt

11/07/09 2:02PM

Page 2 B8 (Form 8) (12/08) Property No. 3 **Creditor's Name: Describe Property Securing Debt:** Northwestern Mutual Life Policy #NN-65LIFE-Surrender value **Northwestern Mutual** @ \$1,531.37 - Cash value @ \$7,043.94 Location: 16313 Taft Rd., Spring Lake MI Property will be (check one): ☐ Surrendered ■ Retained If retaining the property, I intend to (check at least one): ☐ Redeem the property ■ Reaffirm the debt ☐ Other. Explain \_\_\_\_\_\_ (for example, avoid lien using 11 U.S.C. § 522(f)). Property is (check one): ■ Claimed as Exempt ☐ Not claimed as exempt Property No. 4 **Creditor's Name: Describe Property Securing Debt: Northwestern Mutual** Northwestern Mutual Liife - Life Policy 10-003-466-Surrender Value \$5,608.19 Location: 16313 Taft Rd., Spring Lake MI Property will be (check one): ☐ Surrendered Retained If retaining the property, I intend to (check at least one): ☐ Redeem the property ■ Reaffirm the debt (for example, avoid lien using 11 U.S.C. § 522(f)). ☐ Other. Explain \_\_\_\_ Property is (check one):

☐ Not claimed as exempt

■ Claimed as Exempt

ed Penn Mutu Location: 1	Property Securing Debt: lal Life Ins. #006243174 16313 Taft Rd., Spring Lake MI  g 11 U.S.C. § 522(f)).  med as exempt  Part B must be completed for each unexpired lease.
ed Penn Mutu Location: 1	al Life Ins. #006243174 16313 Taft Rd., Spring Lake MI  g 11 U.S.C. § 522(f)).  med as exempt
e, avoid lien using □ Not clair	med as exempt
e, avoid lien using □ Not clair	med as exempt
□ Not clair	med as exempt
□ Not clair	med as exempt
□ Not clair	med as exempt
	*
	*
three columns of	Part B must be completed for each unexpired lease
	Tare B mass of completed for each unexpired lease.
d Property:	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2):  ☐ YES ☐ NO
	d Property:

## UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF MICHIGAN

## NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

### <u>Chapter 7</u>: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments

**B 201** (12/08) Page 2

over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### **Chapter 11:** Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

## 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

#### **Certificate of Attorney**

X /s/ David Knoester

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Printed Name of Attorney	Signature of Attorney	Date
Address:		
6701 Lake Michigan Drive		
PO BOX 637		
Allendale, MI 49401-0637		
616-895-7300		
david@davidknoesterplc.com		
	Certificate of Debtor	
I (We), the debtor(s), affirm that I (we) have	ve received and read this notice.	
$I\ (We),\ the\ debtor(s),\ affirm\ that\ I\ (we)\ have $$$ Don Wayne De Jonge	ve received and read this notice.  X /s/ Don Wayne De Jonge	November 7, 2009
		November 7, 2009 Date
Don Wayne De Jonge	X /s/ Don Wayne De Jonge	

**David Knoester P53887** 

November 7, 2009

11/07/09 2:02PM

# United States Bankruptcy Court Western District of Michigan

		Western District of Michigan		
In re	Don Wayne De Jonge		Case No.	
		Debtor(s)	Chapter	7
	VERI	FICATION OF CREDITOR M	IATRIX	
Γhe ab	ove-named Debtor hereby verifies th	nat the attached list of creditors is true and cor	rect to the best	of his/her knowledge.
Date:	November 7, 2009	/s/ Don Wayne De Jonge		
		Don Wayne De Jonge		

Signature of Debtor

11/07/09 2:02PM

ADVANTA BANK CORP PO BOX 844 SPRING HOUSE PA 19477

ASSOCIATED RECOVERY SYSTEMS PO BOX 479 046 ESCONDIDO CA 92046-9046

BANK OF AMERICA DEPARTMENT 5996 PO BOX 1259 OAKS PA 19456

CHASE CARD SERVICES PO BOX 94014 PALATINE IL 60094-4014

COUNTRYWIDE 1199 NORTH FAIRFAX ST SIMI VALLEY CA 93062-5170

FIA CARD SERVICES PO BOX 15019 WILMINGTON DE 19886-5019

FIA CARD SERVICES PO BOX 15726 WILMINGTON DE 19886-5726

FIFTH THIRD BANK 5050 KINGSLEY DR CINCINNATI OH 45227

FIFTH THIRD BANK 5050 KINGSLEY DR CINCINNATI OH 45227

FLAGSTAR BANK 5151 CORPORATE DRIVE TROY MI 48098

FTH3RD BK P.O. BOX 2306 CINCINNATI OH 45201-2306 GRAND HAVEN PATHOLOGY PC 5620 SOUTHLAKE BLVD TOLEDO OH 43614-1502

MARSHALL & ILSLEY BANK 770 N WATER ST MILWAUKEE WI 53202

NATIONAL CITY PO BOX 856176 LOUISVILLE KY 40285-6176

NATIONAL CITY PO BOX 4068 KALAMAZOO MI 49003

NORTH OTTAWA COMMUNITY HOSP 1309 SHELDON RD GRAND HAVEN MI 49417

NORTHWESTERN MUTUAL 720 EAST WISCONSIN AVE MILWAUKEE WI 53202

NORTHWESTERN MUTUAL 720 EAST WISCONSIN AVE MILWAUKEE WI 53202

NORTHWESTERN MUTUAL 720 EAST WISCONSIN AVE MILWAUKEE WI 53202

PENN MUTUAL 600 DRESHER RD. HORSHAM PA 19044

REDI-WOOD 1350 KOOIMAN AVE. GRAND HAVEN MI 49417-2523

REDI-WOOD 1350 KOOINAN AVE GRAND HAVEN MI 49417 REDI-WOOD 1350 KOOIMAN AVE GRAND HAVEN MI 49417-2523

REDI-WOOD, INC. 1350 KOOIMAN AVE. GRAND HAVEN MI 49417

REGIONAL ADJUSTMENT BUREAU INC PO BOX 34111 MEMPHIS TN 38184-0111

WEST COAST ANESTHESIA PC PO BOX 0630 MUSKEGON MI 49443

WEST COAST UROLOGY PLC 1301 MERCY DR. MUSKEGON MI 49444-1837

WEST MI GASTROENTEROLOGY 1675 LEAHY ST. STE 324 MUSKEGON MI 49442

WEST SHORE DIAGNOSTICS PC 1774 PECK ST. MUSKEGON MI 49441

B22A (Official Form 22A) (Chapter 7) (12/08)

In re Don Wayne De Jonge	
Debtor(s) Case Number:	According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement):
(If known)	☐ The presumption arises.
	■ The presumption does not arise.
	☐ The presumption is temporarily inapplicable.

# CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Unless the exclusion in Line 1C applies, joint debtors may complete a single statement. If the exclusion in Line 1C applies, each joint filer must complete a separate statement.

	Part I. MILITARY AND NON-CONSUMER DEBTORS
1A	<b>Disabled Veterans.</b> If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
IA	□ <b>Declaration of Disabled Veteran.</b> By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).
1B	Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.
1C	Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
	a. □ I was called to active duty after September 11, 2001, for a period of at least 90 days and □ I remain on active duty /or/ □ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;
	OR
	<ul> <li>b. □ I am performing homeland defense activity for a period of at least 90 days /or/</li> <li>□ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.</li> </ul>

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## Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION

Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11. b. Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the 2 purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete only column A ("Debtor's Income") for Lines 3-11. ☐ Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11. d. Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11. All figures must reflect average monthly income received from all sources, derived during the six Column A Column B calendar months prior to filing the bankruptcy case, ending on the last day of the month before Debtor's Spouse's the filing. If the amount of monthly income varied during the six months, you must divide the Income Income six-month total by six, and enter the result on the appropriate line. 3 Gross wages, salary, tips, bonuses, overtime, commissions. 0.00 \$ **Income from the operation of a business, profession or farm.** Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V. 4 Debtor Spouse 0.00 Gross receipts 0.00 \$ Ordinary and necessary business expenses Business income Subtract Line b from Line a 0.00 Rents and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. **Do not include any** part of the operating expenses entered on Line b as a deduction in Part V. 5 Debtor Spouse Gross receipts 0.00 | \$ Ordinary and necessary operating expenses 0.00 \\$ Rent and other real property income Subtract Line b from Line a 0.00 6 Interest, dividends, and royalties. \$ 0.00 7 Pension and retirement income. 0.00 Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that 8 purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed. 0.00 **Unemployment compensation.** Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: Unemployment compensation claimed to be a benefit under the Social Security Act | Debtor \$ **1.569.00** Spouse \$ 1,569.00 **Income from all other sources.** Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or 10 domestic terrorism. Debtor Spouse \$ Total and enter on Line 10 0.00 Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if 11

Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).

1,569.00

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12	Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.		1,569.00		
	Part III. APPLICATION OF § 707(b)(7) EXCLUSION				
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result.	\$	18,828.00		
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)				
	a. Enter debtor's state of residence: MI b. Enter debtor's household size: 1	\$	43,611.00		
	<b>Application of Section 707(b)(7).</b> Check the applicable box and proceed as directed.				
15	■ The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII.				
	☐ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.				

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero.    A		Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2	)		
Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero.    a	16	F.4(1	•		
Description   Section   Section	17	Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did			
C.					
Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result.   S					
Part V. CALCULATION OF DEDUCTIONS FROM INCOME  Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)  National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)  National Standards: health care. Enter in Line al below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are of years of age or older. (The total number of household members must be the same as the number stated in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for household members of your household who are of years of age or older. (The total number of thousehold members of your household who are of years of age or older. (The total number of household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total health care amount, and enter the result in Line 19B.  Household members under 65 years of age  Household members 65 years of age or older  a1. Allowance per member  b1. Number of members  c2. Subtotal  Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and					
Part V. CALCULATION OF DEDUCTIONS FROM INCOME  Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)  National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)  National Standards: health care. Enter in Line al below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age, or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for household members of 5, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.  Household members under 65 years of age  Household members of your household members 65 years of age or older  a1. Allowance per member  b1. Number of members  c2. Subtotal  Subtotal		Total and enter on Line 17	\$		
National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) \$   National Standards: health care. Enter in Line al below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for household members of 5, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.    Household members under 65 years of age	18	Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result.	\$		
National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)  National Standards: health care. Enter in Line al below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are of 55 years of age or older. (The total number of household members under 65, and enter the result in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for household members of 5, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.    Household members under 65 years of age		Part V. CALCULATION OF DEDUCTIONS FROM INCOME			
Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)  National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.  Household members under 65 years of age Household members 65 years of age or older a1. Allowance per member b1. Number of members b2. Number of members c1. Subtotal  Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and		Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)			
Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.    Household members under 65 years of age	19A	Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at			
a1. Allowance per member a2. Allowance per member b1. Number of members b2. Number of members c1. Subtotal c2. Subtotal \$\$ Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and	19B	National Standards: health care. Enter in Line al below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and			
b1. Number of members b2. Number of members c1. Subtotal c2. Subtotal \$  Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and					
c1. Subtotal c2. Subtotal \$  Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and					
Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and					
			\$		
	20.4				
20A Utilities Standards; non-mortgage expenses for the applicable county and household size. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court).	20A	Utilities Standards; non-mortgage expenses for the applicable county and household size. (This information is	¢.		

B22A (Official Form 22A) (Chapter 7) (12/08)

20B	<b>Local Standards: housing and utilities; mortgage/rent expense.</b> Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. <b>Do not enter an amount less than zero.</b>		
	<ul> <li>a. IRS Housing and Utilities Standards; mortgage/rental expense</li> <li>b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42</li> </ul>	\$	
	c. Net mortgage/rental expense	Subtract Line b from Line a.	\$
21	<b>Local Standards: housing and utilities; adjustment.</b> If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:		
22A	Local Standards: transportation; vehicle operation/public transportation expense.  You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.  Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8.  \[ \begin{array}{c} 0 & \lefta 1 & \lefta 2 \text{ or more.} \]  If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)		
22B	<b>Local Standards: transportation; additional public transportation expense.</b> If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for you public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)		
23	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)  1 2 or more.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero.  a. IRS Transportation Standards, Ownership Costs		
	Average Monthly Payment for any debts secured by Vehicle b. 1, as stated in Line 42 c. Net ownership/lease expense for Vehicle 1	\$ Subtract Line b from Line a.	\$
24	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line 3 and enter		
	<ul> <li>a. IRS Transportation Standards, Ownership Costs</li> <li>Average Monthly Payment for any debts secured by Vehicle</li> <li>b. 2, as stated in Line 42</li> <li>c. Net ownership/lease expense for Vehicle 2</li> </ul>	\$ Subtract Line b from Line a.	\$
25	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.		
26	Other Necessary Expenses: involuntary deductions for employment deductions that are required for your employment, such as retirement Do not include discretionary amounts, such as voluntary 401(k) co	contributions, union dues, and uniform costs.	\$

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27	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.				
28	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.				
29	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.				
30	Other Necessary Expenses: childcare. Enter the total childcare - such as baby-sitting, day care, nursery and p		\$		
31	Other Necessary Expenses: health care. Enter the tot health care that is required for the health and welfare of insurance or paid by a health savings account, and that include payments for health insurance or health savings	yourself or your dependents, that is not reimbursed by is in excess of the amount entered in Line 19B. <b>Do not</b>	\$		
32		your basic home telephone and cell phone service - such as nternet service - to the extent necessary for your health and	\$		
33	Total Expenses Allowed under IRS Standards. Enter	r the total of Lines 19 through 32.	\$		
	-	onal Living Expense Deductions penses that you have listed in Lines 19-32			
	Health Insurance, Disability Insurance, and Health S the categories set out in lines a-c below that are reasona dependents.	Savings Account Expenses. List the monthly expenses in bly necessary for yourself, your spouse, or your			
34	a. Health Insurance	\$			
	b. Disability Insurance	\$			
	c. Health Savings Account	\$	\$		
	Total and enter on Line 34.				
	If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:				
	<u>\$</u>				
35	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.				
36	<b>Protection against family violence.</b> Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.				
37	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.				
38	Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.				

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39	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.				\$		
40			Enter the amount that you will conting ganization as defined in 26 U.S.C. § 1			e form of cash or	\$
41	Total	Additional Expense Deductions	s under § 707(b). Enter the total of L	ines	s 34 through 40		\$
		St	ubpart C: Deductions for Del	bt l	Payment		
42	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, and state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.						
		Name of Creditor	Property Securing the Debt	A	Average Monthly Payment	Does payment include taxes or insurance?	
	a.			\$		□yes □no	
				,	Total: Add Lines		\$
43	Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.    Name of Creditor				\$		
44	Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as				\$		
	<b>Chapter 13 administrative expenses.</b> If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense.						
	a.	Projected average monthly Cha	apter 13 plan payment.	\$			
45	b.	issued by the Executive Office information is available at www the bankruptcy court.)	trict as determined under schedules for United States Trustees. (This w.usdoj.gov/ust/ or from the clerk of	X			
	c.	Average monthly administrative	•		otal: Multiply Line	es a and b	\$
46	<b>Total Deductions for Debt Payment.</b> Enter the total of Lines 42 through 45.					\$	
Subpart D: Total Deductions from Income							
47	Total	l of all deductions allowed under	§ 707(b)(2). Enter the total of Lines	33,	41, and 46.		\$
	Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION						
48	Enter the amount from Line 18 (Current monthly income for § 707(b)(2))				\$		
49	Ente	r the amount from Line 47 (Tota	al of all deductions allowed under §	707	(b)(2))		\$
50	Mon	thly disposable income under § 7	707(b)(2). Subtract Line 49 from Line	48	and enter the resu	ılt.	\$
51	<b>60-month disposable income under § 707(b)(2).</b> Multiply the amount in Line 50 by the number 60 and enter the result.				\$		

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**Initial presumption determination.** Check the applicable box and proceed as directed. ☐ The amount on Line 51 is less than \$6,575. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI. 52 ☐ The amount set forth on Line 51 is more than \$10,950 Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI. ☐ The amount on Line 51 is at least \$6,575, but not more than \$10,950. Complete the remainder of Part VI (Lines 53 through 55). 53 Enter the amount of your total non-priority unsecured debt 54 Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result. Secondary presumption determination. Check the applicable box and proceed as directed. ☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. 55 ☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Part VII. ADDITIONAL EXPENSE CLAIMS Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses. Expense Description Monthly Amount 56 b. \$ \$ d. \$ Total: Add Lines a, b, c, and d \$ **Part VIII. VERIFICATION** I declare under penalty of perjury that the information provided in this statement is true and correct. (If this is a joint case, both debtors must sign.) Date: November 7, 2009 Signature: /s/ Don Wayne De Jonge 57 Don Wayne De Jonge (Debtor)

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